COVID-19 and Maxillofacial Surgery



The pandemic of novel coronavirus disease (COVID-19) has impacted on all spheres of life including all economic activity, travel, governance, education, and the like. [1,2] Dentistry and oral surgery are also not spared.[1] As like most of the governments, India is also progressing with new norms such as physical distancing, lockdowns, and quarantine of suspected cases, aggressive testing to fight against the COVID-19.[3,4] The COVID-19 is known to spread through contact, aerosol, mucosal/respiratory droplets, and possibly by fomite spreads. [5] Owing to this form of spread, dentists and maxillofacial surgeons are particularly vulnerable to transmission of COVID-19 due to the need for close patient proximity and the type of instrumentations used in the field.^[6] The unclear incubation periods of COVID-19 as well as virus shedding by asymptomatic patients expose oral maxillofacial surgeons (OMFS) to COVID-19.[1,2] Owing to COVID-19 stigma, patients may conceal their flu-like symptoms or carrier

In this situation, OMFS need to revisit our infection control procedures before fulfilling our professional and moral obligation. Before encouraging treatment, globally advocated COVID-19 sterilization and disinfection protocol need to be followed. In addition, hand hygiene practices, barrier techniques, the use of personal protective equipment (PPE), disinfection of surfaces, and sterilization of equipment need to be ensured.

The triaging of patients, taking exposure history, classifying procedures as emergency, urgency, and elective, as per the guidelines is the need of the hour. For elective and condition that can be managed with remote contact like pharmacological telephonic consultation can be done.^[7,8]

All elective and avoidable procedures can be postponed in India, till COVID-19 is contained. Procedures that require airway management, arresting bleeding, patients who need drainage of infections that is resistant to antibiotics, oncosurgery procedures where a delay in surgery can have an

impact on survival period can be performed. If the procedure requires immediate treatment, it would be safer to assume them to be COVID-19 positive till proven otherwise and use appropriate guidelines. Besides the safety measures, conservative treatment should be considered, provided mucosal contact or aerosol generation would be eliminated. Suspected COVID-19 cases shall be treated if at all, at negative pressure theaters or airborne infection isolation rooms. During surgery, all aerosols shall be avoided.^[7,8]

As a part of the anesthetic fitness and patient preparation, the patient may be admitted at least 48 hours prior to procedures. Patients and caregivers may be subjected to the COVID-19 screening test. Additionally patient shall undergo imaging study of lungs (Computed Tomogram). Once admitted, they may be refrained from moving out of the hospital premises. The admitted rooms shall be subjected to regular sanitization as per local authorities' instruction. Visitors, if any, may be temporarily prevented from visiting patients as their interaction may increase the risk of COVID-19 infection. At any point in time, patients and attender should practice social distancing and wear masks continuously. After discharge, the patient's health status may be followed at regular intervals for at least a month to ensure that they remain free of COVID-19.

At the same time, the COVID-19 situation also provides a novel opportunity to learn, update our knowledge, and update ourselves such that we continue to save lives and recreate more face and smiles.

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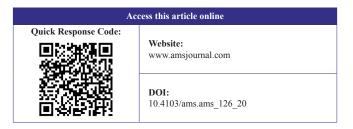
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How to cite this article: Balaji SM. COVID-19 and maxillofacial surgery. Ann Maxillofac Surg 2020;10:1-2.